BETHESDA BRAC IMPROVEMENTS MD 185 (CONNECTICUT AVENUE) AND JONES BRIDGE ROAD/KENSINGTON PARKWAY

A \$18,300,000 Grant Proposal to the Office of Economic Adjustment, U.S. Department of Defense

Submitted by the Maryland State Highway Administration, Maryland, Department of Transportation

October 7, 2011

RE: Federal Register Document 2011-184000: Volume 70, Number 140, July 21, 2011

Notice of Federal Funding Opportunity (FFO) for construction of Transportation Infrastructure

Improvements Associated with medical facilities related to recommendations of the 2005

Defense Base Closure and Realignment Commission.

A. POINT OF CONTACT:

Barb Solberg, Division Chief Highway Design Division Office of Highway Development State Highway Administration 707 North Calvert St. Baltimore MD, 21202 410-545-8830 BSolberg@sha.state.md.us

B. EXISTING OR PROJECTED TRANSPORTATION INFRASTRUCTURE ISSUE:

Relocation of Walter Reed

The Bethesda Base Realignment and Closure (BRAC) improvement projects are intended to mitigate gridlock, improve pedestrian access and safety, and support multi-modal transportation systems around the new federally-mandated Walter Reed National Military Medical Center. One of the most noteworthy moves mandated by the 2005 BRAC law was the closure of the Walter Reed Army Medical Center (WRAMC) in Washington, D.C., with the relocation of most of its functions and personnel to the campus of the National Naval Medical Center (NNMC) in Bethesda, Montgomery County, Maryland, establishing the joint service Walter Reed National Military Medical Center (WRNMMC). The intent of consolidating these two premier institutions was to establish the modern "crown jewel" of military medical care and research combining the best of Army, Navy and Air Force practices that could serve the needs of the American military facing new kinds of catastrophic injuries in the era following September 11, 2001.

The BRAC expansion will add 2,500 personnel to the 8,000 currently stationed at NNMC, and the hospital visitor load will double to almost 1,000,000 visits annually. The road network around NNMC is already at capacity and is at Level of Service (LOS) F – or failing, in common vernacular. If left unmitigated, this growth will create untenable gridlock – where the true Level of Service cannot even be measured beyond "F" — that would negatively affect the ability of wounded warriors, doctors and emergency personnel to access the campus on a timely basis.

• Impacts of BRAC on Bethesda's Urban Transportation Infrastructure

Bethesda is located in Montgomery County, MD which has a total population approaching 1,000,000. Bethesda is in the heart of the National Capital Region and draws employees and visitors to its thriving commercial district from across the Washington-Baltimore Metropolitan area of over 8,000,000 people. The area of Bethesda that is impacted by BRAC is a densely populated and highly developed community inside the Capital Beltway with approximately 56,000 residents and an employment base of 70,000. Bethesda has long-established residential neighborhoods and a thriving commercial district. Along with NNMC, the BRAC-impacted area of Bethesda is home to the National Institutes of Health (NIH) which is the largest employer in Montgomery County with over 18,000 on-campus personnel, and Suburban-Johns Hopkins Hospital which is the region's designated trauma center. The NNMC, NIH and Suburban collaborate as the Bethesda Hospitals Emergency Preparedness Partnership.

Suburban-Johns Hopkins Hospital employs over 1,400 people, and has more than 13,000 admissions per year. The hospital also supports more than 40,000 emergency room visits and 90,000 outpatient visits per year.

The NNMC is directly across from the NIH campus and currently employs 8,000 personnel. The hospital at NNMC receives approximately 500,000 visits per year. By September 2011, BRAC will increase personnel at NNMC by almost one-third to 10,200, and will double the Medical Center's visitor load to approximately 1,000,000 per year. Despite Montgomery County's sophisticated planning and projection process, the County did not anticipate this rapid level of growth. In most BRAC growth communities, roadway improvements are a common solution to BRAC-related increases in traffic.

The 2005 BRAC law committed billions of dollars to fund BRAC-related construction on the campuses of affected installations, but did not commit funds to help communities improve their transportation infrastructure to meet dramatic and rapid growth due to BRAC. The NNMC was able to identify specific impacts of BRAC growth at NNMC on Bethesda's transportation network in its March 2008 Environmental Impact Statement (EIS): For Activities to Implement 2005 Base Realignment and Closure Actions At National Naval Medical Center Bethesda, Maryland. In short, the major roadways and intersections that

serve NNMC are already at or approaching LOS F; the BRAC growth would make failing traffic even worse.

The transportation analysis that was part of the EIS identified that all four of the SHA intersections will operate above capacity during peak periods. Most other BRAC growth occurs in areas that are removed from urban population centers, and transportation solutions tend to call for additional highway capacity. However, NNMC's location in a settled and densely populated urban area dictates a combination of approaches. Potential traffic mitigations were identified that focus on roadway, transit, and pedestrian improvements.

Necessity of Federal Assistance for Project Completion

Mitigating BRAC-related congestion will require a multi-modal approach to improve traffic and pedestrian movement and to increase the use of mass transit and other alternative means of transportation. The State of Maryland and Montgomery County are working aggressively to mitigate congestion caused by BRAC consolidation in Bethesda, but it is readily evident that neither the State nor the County has sufficient resources to implement all that is necessary.

This FFO proposal relates to a Maryland State Highway Administration (SHA) project to provide multi-modal highway transportation improvements within a highly urbanized roadway network surrounding NNMC that is already plagued with regular congestion. It is important to note that this project is just one of several designed by the State and County Departments of Transportation to mitigate BRAC-related congestion.

The five major SHA improvement projects, in order of priority are:

- 1. MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane;
- 2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
- 3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
- 4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
- 5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

This project, if funded, would be most effective if all the related projects being submitted by Montgomery County and the State of Maryland are funded. The full program of projects is the result of extensive collaboration with local, state and federal stakeholders in the BRAC actions at NNMC. Priority projects identified by stakeholders have been designed to complement each other, and collectively serve to foster an overall network that meets the considerable transportation challenges associated with BRAC actions in Bethesda. In total, the program will improve traffic operations, promote the use of alternative transportation including mass transit and bicycle and pedestrian facilities, and reduce the use of single occupancy vehicles and the demand for parking at the new Walter Reed National Military Medical Center. These projects, along with improvements to bicycle and pedestrian

facilities already undertaken by Montgomery County, will ensure greater access to WRNMMC for its patients and staff. But for funding from this Office of Economic Adjustment (OEA) Federal Funding Opportunity, these projects cannot be completed.

• Support from the Defense Department

The Department of Defense supports these projects and has committed \$28.174 million through the Defense Access Roads program for implementation of the Maryland Route 355 Multimodal Crossing Project. The Navy has made very clear its support for the BRAC projects in development (please see Attachment A, a letter from Captain M. P. Malanoski and Rear Admiral A. L. Stocks), and recognizes the role that they stand to play in addressing the traffic considerations raised in the March 2008 EIS.

Additionally, the Department of Defense, through OEA, has demonstrated support of mitigation projects underway by providing \$450,000 to support design of the SHA intersection improvement program at NNMC.

Road Improvements

Many visitors and commuters to the military medical campus will arrive by car. The major roads serving NNMC are mainly state highways. Capacity cannot be increased in this densely developed region without unacceptable community disruption, but relatively low-impact improvements can help facilitate increased traffic flow.

The SHA is engaged in intersection improvement projects that are supported by NNMC's March 2008 EIS, and SHA anticipates maintaining the same or slightly improved LOS, even with increases of BRAC-related traffic. The SHA is coordinating these projects with traffic flow improvements the NNMC is planning at its gates on MD 355 (Rockville Pike) and Jones Bridge Road. The SHA projects will also include upgrades to adjoining bicycle and pedestrian paths to accommodate those modes of urban commuting.

When all improvements are constructed, significant benefits will be provided to the entire transportation network. Based on analysis conducted using Synchro traffic simulation software, the intersection improvements are projected to reduce fuel consumption in the study area by approximately 1,300 gallons each day during the peak hours compared to the No-Build condition. Considering an average gas price of \$3.75 per gallon, that equates to a user cost savings of over \$3 million per year in fuel cost alone. Additionally, the proposed intersection improvements are projected to reduce emissions of carbon monoxide (CO), nitrogen oxides (NOx), and volatile oxygen compounds (VOC) by 43% during the AM peak hour and by 28% during the PM peak hour compared to the No-Build condition.

The SHA is submitting proposals to OEA for each BRAC improvement project listed above, and the locations can be seen in Figure 1.

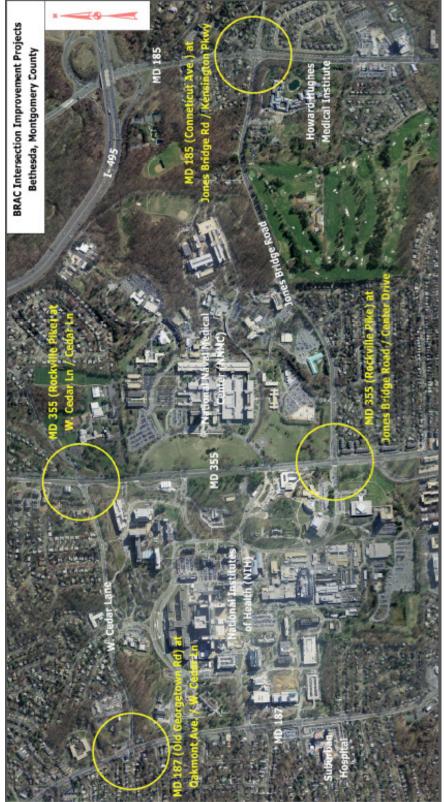


Figure 1: BRAC Improvement Locations

• Bicycle and Pedestrian Improvements

BRAC-related growth requires that the State and County's robust bicycle and pedestrian trail network be improved. The SHA and the Montgomery County Department of Transportation (MCDOT) hope to encourage an increase in bicycle commuters and ridership, by connecting existing bike paths and sidewalks with new and expanded paths around NNMC. The NNMC campus is directly across from the campus of NIH, the world's supreme medical research institution and the largest employer in Montgomery County. Today, NIH has an active bicycle commuter club with over 700 members; NNMC will emulate this program as part of its BRAC-related Transportation Management Plan.

Commuter Bus Improvements

State, county, and regional transportation authorities including the Washington Metropolitan Area Transit Authority (WMATA) are working with NNMC and NIH to study ways to expand existing bus transit service to accommodate BRAC growth at NNMC and expected long-term growth at NIH. This may include expanding or realigning existing routes or establishing new routes utilizing outlying park-and-ride commuter lots. In addition, NNMC and NIH are collaborating to provide commercial commuter bus service from numerous points in the Washington-Baltimore region for their personnel.

C. PROJECT DESCRIPTION:

This Grant proposal, if accepted by OEA, would provide \$18.3 million for the intersection improvements at MD 185 (Connecticut Avenue) and Jones Bridge Road/ Kensington Parkway. This intersection is the second prioritized project near the NNMC in need of improvements to mitigate for additional traffic demand due to BRAC consolidations. With the BRAC impact, the existing intersection currently operates over capacity, with a vehicle delay of 146.0 sec/vehicle during the AM peak hour and 193.7 sec/vehicle during the PM peak hour, which makes it complicated to accommodate additional personnel without substantial infrastructure improvements. With all the intersection improvements completed, the capacity at the intersection of MD 185 and Jones Bridge Road will increase 30% in the AM peak hour, and 36% in the PM peak hour.

This improvement project has been separated into two construction contracts, due to the timing and funding constraints. The first contract includes phases 1 and 2, and consists of widening along northbound and southbound MD 185 from Manor Road to I-495. Phases 1 and 2 are currently fully funded for engineering design, land acquisition, and construction. The total cost of Phases 1 and 2 is \$9.6 million. The second contract includes phase 3 improvements and consists of widening along eastbound and westbound Jones Bridge Road. The total cost of Phase 3 is \$20.1 million. Phase 3 is currently funded for engineering design, and funds are needed for land acquisition and construction with a total cost of \$18.3 million.

MD 185 and Jones Bridge Road/ Kensington Parkway - Phases 1 and 2

The purpose of this intersection project is to improve the capacity, safety and operation of the intersection to support the mission of the new Walter Reed National Military Medical Center by addressing transportation needs. The limits of work along MD 185 begin at, but do not include, the existing intersection of MD 185 and Manor Road and extend in a northerly direction to I-495 (Capital Beltway) on ramp for a total distance 2955 feet.

Phase 1 consists of widening along southbound MD 185 to the outside to add an exclusive right-turn lane from the I-495 (Capital Beltway) off-ramp to Jones Bridge Road. This right-turn improvement will separate right-turns from through traffic and provide longer storage length and better circulation through the intersection for the AM right-turn traffic heading from I-495 to Walter Reed National Military Medical Center. Phase 1 is projected to reduce vehicle delay by 41% during the AM peak hour from 146.0 sec/vehicle to 86.3 sec/vehicle.

Phase 2 consists of widening along northbound MD 185 to the median from Manor Road to the I-495 on-ramp to provide an additional through lane. The outer lane will turn to an exclusive right-turn lane from northbound MD 185 to I-495 eastbound. Phase 2 is projected to reduce vehicle delay by 23% during the PM peak hour from 193.7 sec/vehicle to 148.2 sec/vehicle.

Pedestrian safety and transit access are also important features in the scope. The intersections and sidewalks within the project limits will be upgraded to comply with the Americans with Disabilities Act (ADA). Green buffer will be provided between sidewalks and curb wherever feasible to improve pedestrian safety by keeping pedestrians away from large volumes of fast moving vehicles and the plowed snow in the winter. The right-turn islands in the northwest corner and southwest corner will be removed to enhance pedestrian safety when crossing. This project will also include the installation of pedestrian crosswalks, pedestrian signals including visual and audible indicators, and the reconstruction of pedestrian ramps to ensure that they are ADA compliant. Other improvements include replacing existing curb and gutter, grinding existing pavement, pavement overlay, reconstruction of traffic signals, landscaping, drainage, and storm water management (SWM) facilities.

MD 185 and Jones Bridge Road/ Kensington Parkway – Phase 3

The limits of work along Jones Bridge Road begin at 450 ft west of Platt Ridge Road and extend in an easterly direction to Montgomery Avenue for a total distance 2735 feet. The eastbound roadway of Jones Bridge Road will be widened to the south to add an additional left-turn lane. The westbound roadway of Jones Bridge Road will be widened to the south to separate the shared through/right-turn lane into two different lanes. The storage lengths for all turn lanes will be extended to accommodate additional traffic demand. Extensive reconstruction of retaining walls is necessary due to bifurcation between Jones Bridge Road and the Howard Hughes Medical Institute parking lot. This improvement includes the

addition of an off-road bike path along Jones Bridge Road from Platt Ridge Road to Connecticut Avenue, which adheres to Montgomery County's current Master Plan recommendation for bike accommodation along Jones Bridge Road. With the proposed Phase 3 improvements, the intersection operation is anticipated to greatly improve during the PM peak hour, with vehicle delay reduced by 40% from 148.2 sec/vehicle to 88.8 sec/vehicle.

Below is a table of the average delay time per vehicle in the AM and PM peak hour through the subject intersection. It shows how the full build improvements help to accommodate additional personnel at NNMC by reducing delays to better than pre-BRAC '2011 No-Build' conditions. With sequential construction of the improvements, the full build congestion mitigations are projected to reduce vehicle delay by 48% during the AM peak hour from 146.0 sec/vehicle to 75.7 sec/vehicle, and by 54% during the PM peak hour from 193.7 sec/vehicle to 88.8 sec/ vehicle.

Table 1: Delay Time and Percent Reduction

MD 185 at Jones Bridge Road/		2011 No	Phases 1&2		Phase 3		Full Build	
Kensington		Build						
Pkwy.		Delay	Delay	Reduction	Delay	Reduction	Delay	Reduction
Peak	AM	146.0 s	84.8 s	42%	75.7 s	11 %	75.7 s	48%
Hour	PM	193.7 s	148.2 s	23%	88.8 s	40%	88.8 s	54%

Note 1: Phases are sequential. Delay times reflect phases being constructed in order, not individually. Note 2: Full build delay is compared to no build delay.

D. PROJECT ENGINEERING INFORMATION:

During Preliminary Engineering Design, SHA decided to reduce the project scope to minimize the impacts to adjacent residential properties and environmental resources. The measures that have been taken by SHA to reduce impacts include use of narrow lane widths, tightening intersection geometrics, and evaluation of various lane configurations to reduce the typical section adjustments.

The exclusive right turn lane on northbound MD 185 and the exclusive right turn lane on eastbound Jones Bridge Road were eliminated from the original scope, to minimize environmental impacts. The roadway widening along northbound MD 185 will be constructed towards the median instead of towards the outside of the roadway, as originally planned; as a result, the impact to the properties along the east side of MD 185 has been significantly reduced, and avoids four total takes.

The proposed typical section will include 10 foot through lanes and a 13 foot outside lane (including the gutter pan) on both MD 185 and Jones Bridge Road. The travel lane widths were reduced from 11 feet in the initial scope to 10 feet, which minimizes the right of way taking and environmental impacts along both MD 185 and Jones Bridge Road. These

MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway

changes have increased the technical feasibility of the project, which is depicted in a rendering of the project's footprint in Figure 2.

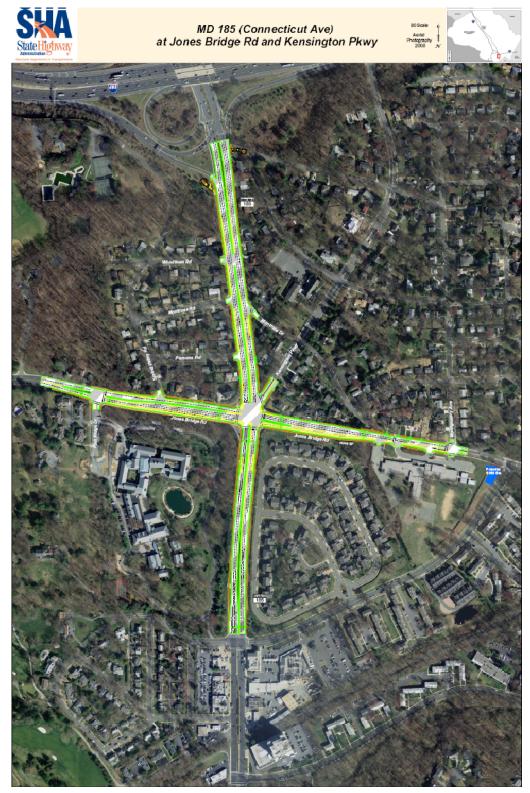


Figure 2: MD 185 (Connecticut Avenue) and Jones Bridge Road/ Kensington Parkway

E. PROJECT PARTIES:

- The following stakeholders were directly involved in the project development process:
 - Maryland Department of Transportation (MDOT)
 - Maryland State Highway Administration (SHA)
 - Montgomery County Department of Transportation (MCDOT)
 - Federal Highway Administration (FHWA)
 - Maryland Transit Administration
 - Washington Metropolitan Area Transit Authority (WMATA)
 - Naval Support Activity-Bethesda
 - National Institutes of Health (NIH)
 - o Maryland-National Capital Park and Planning Commission
 - National Capital Planning Commission
 - o BRAC Implementation Committee
 - Chevy Chase Valley Community
 - Chevy Chase Park Homeowner Association
 - North Chevy Chase Village Community
 - o Howard Hughes Medical Institute

F. GRANT FUNDS AND OTHER SOURCES OF FUNDS:

The SHA currently has a funding level of approximately \$44 million for all five improvement projects. The sources of funding can be seen in Table 2.

Table 2: Current Sources of Funding

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Source	Funding		
OEA	\$450,000		
State	\$3,786,000		
Federal	\$39,796,000		
Total	\$44,032,000		

Table 3: Cost Breakdown for Each Project

Project	Total	Funded	Unfunded
MD 355 (Rockville Pike) and W. Cedar	\$50.2 M	\$31.2 M	\$19.0 M
Lane / Cedar Lane			
MD 185 (Connecticut Avenue) and Jones	\$29.7 M	\$11.4 M	\$18.3 M
Bridge Road / Kensington Parkway			
MD 187 (Old Georgetown Road) and	\$8.0 M	\$0.7 M	\$7.3 M
West Cedar Lane / Oakmont Avenue	30.0 ΙΝΙ	30.7 Ι ۷Ι	۱۷۱ د./ډ
MD 355 (Rockville Pike) and Jones Bridge	\$5.0 M	\$0.7 M	\$4.3 M
Road / Center Drive	\$5.0 W		
Bethesda Trolley Trail Connections And	Ć1 1 NA	\$0.0 M	\$1.1 M
Passenger Drop-Off Loop	\$1.1 M		

Table 4: Unfunded Costs

Current Funding Level	\$11.4 M	
Total Estimated Cost	\$29.7 M	
MD 185 and Jones Bridge Rd. / Kensington Pkwy. Phase 1 and 2 \$9.6 M		
MD 185 and Jones Bridge Rd. /Kensington Pkwy. Phase 3	\$20.1 M	
Total Unfunded Costs for Proposed OEA Projects	\$18.3 M	

G. Uses of Construction Project Funds:

- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 1 and 2
 - o Preliminary and Final Engineering Design \$1.3 million (Funded)
 - Land Acquisition \$0.51 million (Funded)
 - Construction (including Utilities) \$7.8 million (Funded)
- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 3
 - o Preliminary and Final Engineering Design \$1.8 million (Funded)
 - Land Acquisition \$6.6 million (Unfunded)
 - Construction (including Utilities) \$11.7 million (Unfunded)

Note: Project Administration / Inspection Costs are accounted for in above bulleted items

H. PROJECT SCHEDULE:

- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 1 and 2
 - o Preliminary and Final Engineering Design Complete 10/18/2011
 - National Environmental Policy Act (NEPA) Environmental Compliance approved – 09/13/2010
 - Land Acquisition Complete 10/14/2012
 - Utility Relocation Complete 01/25/2012
 - o Construction start 01/26/2012
 - o Construction complete 01/31/2014
- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 3
 - Preliminary and Final Engineering Design Complete 4 months
 - o NEPA Environmental Compliance approval 4 months
 - Land Acquisition Complete 9 months
 - Utility Relocation Complete 27 months
 - Construction start 27 months
 - Construction complete 51 months

Note: All time frames are from the date funding is received

I. ENVIRONMENTAL APPROVALS:

- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 1 and 2
 - Maryland Historic Trust (MHT) concurrence 08/04/2010
 - NEPA Category Exclusion (CE) approved 09/13/2010
 - SWM/ Erosion & Sediment (E&S) Control Permit 10/18/2011
 - o Roadside Tree Permit 10/18/2011
 - National Pollutant Discharge Elimination System (NPDES) General Permit for Construction activity – 09/15/2011
- MD 185 and Jones Bridge Road/ Kensington Parkway Phase 3
 - Maryland Historic Trust (MHT) concurrence 12/2011
 - To meet the NEPA requirements, a Category Exclusion (CE) are under process and anticipated to receive approval by January 2012
 - Approval from Maryland-National Capital Park and Planning Commission regarding park impact and forest impact is anticipated by January 2012
 - SWM/ E&S Control submittal was made to Maryland Department of the Environment (MDE) to procure a permit under the 2007 SWM regulations on June 7, 2011, and final approval is anticipated by the completion of Engineering Design.

- Roadside Tree Permits will be submitted to Maryland Department of Nature Resource for approval, and the approval is anticipated by the completion of Final Engineering Design.
- NPDES General Permit for Construction activity 01/2012

J. STATE AND LOCAL PLANNING:

Transportation Improvement Program (TIP)

The National Capital Region Transportation Planning Board (TPB) is the designated Metropolitan Planning Organization for the Washington Metropolitan Area. The TPB approved the 2011-2016 TIP, a 6-year financial program that describes the schedule for obligating federal funds to state and local projects, on November 12, 2010. The TIP contains funding information for all modes of transportation in Suburban Maryland, Northern Virginia, and the District of Columbia to include highways with High Occupancy Vehicles as well as transit capital and operating costs.

The TPB conducted a public comment period and a public forum on October 14, 2010 to go over the projects in the 2011-2016 TIP. The Air Quality Conformity Determination for the FY 2011-2016 TIP demonstrates that all required emissions tests are being met and conforms to all requirements of the Clean Air Act Amendments of 1990.

The Bethesda BRAC intersection improvement projects appear in the Suburban Maryland portion under the SHA tab of the 2011 TIP, specifically page M-2, line 2. At this time, the description includes, as one line item, all four major intersections of the SHA Intersection Improvement project listed in Section B. However, as additional phases of these projects get funded, they will get split up accordingly and amended into the TIP as individual projects. The latest draft of the MDOT Consolidated Transportation Program (CTP) has MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane and MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway listed as separate projects, since a portion of them are funded. In addition to the intersection projects, SHA will also be constructing as a separate project, a hiker/biker trail that provides a direct link between Bethesda and Rockville, Maryland, which will also be amended into the TIP as a stand alone project.

• Statewide Transportation Improvement Program (STIP)

The Fiscal Year 2011 Maryland STIP is a four-year, fiscally constrained, and prioritized set of transportation projects, compiled from statewide, local, and regional plans. In the case of the Bethesda BRAC intersection improvement projects, the STIP includes the approved 2011 TIP from the Washington Region.

A key component of the STIP process is the Annual Consultation Process, known as the Fall Tour, which is a process stipulated by State law requiring the Secretary of Transportation to visit with, and present to each of the State's county jurisdictions the annual draft of

Maryland's six-year capital investment program known as the CTP. The Bethesda BRAC intersection improvement projects have been formally presented in the CTP since 2008.

Maryland's 2011 STIP, which has been approved by FHWA, includes the Bethesda BRAC intersection improvement projects because it is listed in the 2011 TIP for the Washington Region.

K. GRANTS MANAGEMENT:

The SHA successfully administers over \$600 million each year in federal funding which is made up of formula apportionments, allocated program funds, discretionary program funds (either Congressionally designated or awarded by FHWA), and other special federal funding, (e.g., Department of Defense OEA grants).

The Federal-aid Highway Program is a reimbursable program, and has been since the early part of the 20th Century. That means the Federal Government only reimburses States for costs actually incurred - in contrast to a pre-paid grant program. Projects are put under agreement with FHWA (approved), work is started with State dollars and then FHWA is invoiced for payment of pre-approved amounts.

Approximately 46% of the 2011-2016 MDOT CTP Capital Program (\$9.5 billion) is administered by SHA.

Two excellent examples of SHA's ability to oversee and deliver projects on time and on budget are the Woodrow Wilson Bridge (WWB) and the Intercounty Connector (ICC).

Woodrow Wilson Bridge (WWB)

In October 2008 Maryland, along with Virginia, was awarded the 2008 America's Transportation Award Grand Prize by the American Association of State Highway and Transportation Officials (AASHTO). The WWB was selected for being on-time, on budget and most importantly for its innovative management in areas of the environment, safety, construction management and financial planning. It was called a "premier example of innovative management," for its collaborative efforts to keep this \$2.47 billion project on time and on budget while coordinating four sponsoring agencies: FHWA, SHA, Virginia Department of Transportation (VDOT), and the District of Columbia Department of Transportation. The award included \$10,000 for Maryland to use for transportation-related educational scholarships.

Intercounty Connector (ICC)

The ICC has been selected to receive the 2011 AASHTO *President's Transportation Award for Highways.* This \$2.56 billion mega-project was selected for the innovative management approach undertaken by the *ICC Team* to deliver one of the first three all electronic toll (AET) highways on new alignment to open in the United States. The *ICC Team* kept the project on schedule, on budget, set precedents for handling sensitive environmental areas, exceeded goals for disadvantaged business enterprise participation, and executed a successful community outreach program, all critical to the project's success. As a transportation facility more than 50 years in the making, the ICC sets a national standard for both environmental protection/stewardship and the provision of a high quality and safe AET facility.

L. SUBMITTING OFFICIAL:

As Acting Administrator of the Maryland State Highway Administration, appointed by the Secretary of the Maryland Department of Transportation in July of 2011, I am pleased to submit the following five grant proposals for the Office of Economic Adjustment's (OEA) consideration in connection with its grant program for transportation projects in support of Base Realignment and Closure (BRAC) consolidations at military medical facilities. The five submissions include grant proposals for OEA funding for the following five transportation improvement projects:

- 1. MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane;
- 2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
- 3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
- 4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
- 5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

Together with additional critical improvements in development by the Montgomery County Department of Transportation as part of its Maryland Route 355 Multimodal Crossing Project, these projects will collectively serve to help mitigate the impacts of BRAC at the newly created Walter Reed National Military Medical Center, and ensure that the transportation network at the Bethesda campus effectively supports the Installation's mission, and provides for safe, efficient travel, by automobile, bicycle, and on foot, for all members of the local community.

The priority projects detailed herein reflect the exhaustive collaboration of local, state and BRAC stakeholders in the region, and their shared commitment to developing multimodal solutions for the transportation challenges associated with BRAC. I appreciate your consideration of our submission, and look forward to the expeditious implementation of these critical projects in the coming months and years.

Thank you again for your consideration.

Darrell B. Mobley
Acting Administrator
State Highway Administration
707 North Calvert Street
Baltimore MD 21202
410-545-0400
dmobley@mdot.state.md.us

Attachment A:

DEPARTMENT OF THE NAVY WALTER REED NATIONAL MILITARY MEDICAL CENTER (20889-5600) NAVAL SUPPORT ACTIVITY BETHESDA (20889-5600) BETHESDA MARYLAND

IN REPLY REFER TO

NAVSUPPACT Bethesda 11000 Ser N00/0174 4 Oct 11 WRNMMC Bethesda 11000 Ser 00/2570 4 Oct 11

JOINT LETTER

Mr. Darrell B. Mobley Acting Administrator State Highway Administration 707 North Calvert Street Baltimore, MD 21202 Mail Stop: C-400

Dear Mr. Mobley:

As the Commander, Walter Reed National Military Medical Center (WRNMMC) and the Commanding Officer, Naval Support Activity Bethesda (NSAB) we provide this letter for Montgomery County and Maryland officials who are seeking funding for traffic projects that impact our organizations. Montgomery County is submitting a request to fund the design and construction of a Metro Crossing project that will provide direct access to the Medical Center Metro Station from the NSAB campus for commuters and visitors using rail, bus, and car or van pools, as well as bicyclists and pedestrians. This urgently needed project will help ease and seek to prevent untenable gridlock and provide timely access to the installation by enabling thousands of personnel and visitors who come to WRNMMC and NSAB every day to use transit and other alternatives instead of driving alone.

The State of Maryland is requesting funds for four separate major intersection improvement projects that serve WRNMMC and NSAB: MD 355 at Cedar Lane; MD 185 at Jones Bridge Road; MD 187 at West Cedar Lane; and MD 355 at Jones Bridge Road. These projects will improve traffic operations and pedestrian safety at these currently failing intersections, even with the increased volume of traffic that will be drawn to WRNMMC and NSAB. Furthermore, the State of Maryland will seek to improve MD 187 (Old Georgetown Road) by expanding a regional network of paths that are used by thousands of cycling and pedestrian commuters every day.

NAVSUPPACT Bethesda 11000 Ser N00/0174 WRNMMC Bethesda 11000 Ser 00/2570

Despite BRAC construction of three parking structures, there exists a parking shortfall of approximately 1,300 spaces for staff parking. Currently, a significant portion of parking in the new structures is reserved for patients and their visitors. WRNMMC is now the primary hospital that first receives all of our Nation's wounded, ill, and injured from overseas facilities. In addition, there will be a loss of approximately 750 additional parking spaces to support necessary construction. Given the lack of staff parking, there has been a significant increase in the number of staff members requiring the use of alternative modes of transportation to include mass transit, cycling, and walking. The proposed transportation infrastructure projects would provide comprehensive improvements to traffic operations while promoting pedestrian safety and greater use of these alternate modes of transportation. In addition, increased access to the existing network of bicycle and pedestrian paths will encourage greater use of alternative transportation modes and remove more vehicles from an already highly congested Medical Center area. In short, the proposed infrastructure projects would not only enable the staff at WRNMMC to successfully complete its mission, providing world-class medical care, but would also benefit the surrounding community, which includes the National Institutes of Health, the Bethesda Urban District, and nearby residential communities.

Sincerely

M. P. MALANOSKI

Captain, Medical Corps

U.S. Navy

Commanding Officer

Naval Support Activity

Bethesda

Sincerely,

A. L. STOCKS

a. 2. Stacks

Rear Admiral, Medical Corps

U.S. Navy

Commander

Walter Reed National Military Medical Center